

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

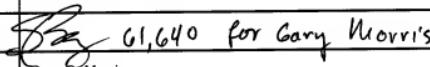
Total Number of Pages in This Submission

Application Number	09/500,639 (Confirm. No. 2896)
Filing Date	February 9, 2000
First Named Inventor	Chun-Ming Lu
Art Unit	2178
Examiner Name	Kyle R. Stork
Total Number of Pages in This Submission	3 Attorney Docket Number 026977-000510US

**ENCLOSURES (Check all that apply)**

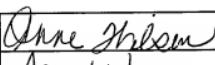
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC		
<input type="checkbox"/> <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board		
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> of Appeals and Interferences		
<input type="checkbox"/> <input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a	<input type="checkbox"/> Appeal Communication to TC		
<input type="checkbox"/> <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Provisional Application	(Appeal Notice, Brief, Reply Brief)		
<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Proprietary Information		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Status Letter		
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):		
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Statement Under 37 CFR 3.73(b)		
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> CD, Number of CD(s) _____			
<input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Landscape Table on CD			
<table border="1"> <tr> <td>Remarks</td> <td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>			Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.			

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Gary S. Morris		
Date	3/14/08	Reg. No.	40,735

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being filed via EFS-Web with the United States Patent and Trademark Office on the date shown below.

Signature			
Typed or printed name	Anne Wilson		
	Date	3/14/08	